

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new non-provisional applications under 37CFR§1.53(b))</small>		Attorney Docket No.	CDM/3772.9999
		First Inventor	Freeland, Robert C.
		Title	STACKABLE WIRE FRAME STORAGE BIN
		Express Mail Label No.	EL915424748US

16434 U.S. PTO
10/632597
08/01/03

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims small entity status <small>See 37 C.F.R. 1.27</small> 3. <input checked="" type="checkbox"/> Specification [Total pages <u>9</u>] <small>(preferred arrangement set forth below)</small> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Federally Sponsored R&D - Reference to sequence listing, a table or a computer program listing - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>2</u>] 5. Oath or Declaration [Total Sheets <u>2</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> i. <input type="checkbox"/> Deletion of Inventor(s) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.53(d)(2) and 1.33(b)</small> 6. <input type="checkbox"/> Application Data Sheet. See 37 C.F.R. 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on i. <input type="checkbox"/> CD-ROM or CD-R (2 copies) or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS


9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 11. <input type="checkbox"/> English translation document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) /PTO SB08 <input checked="" type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request under 35 USC 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small> 17. <input checked="" type="checkbox"/> Other Check
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 C.F.R. 1.76.

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 1
 Prior application information: Examiner _____ Group No./Art Unit _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number: _____		or <input checked="" type="checkbox"/> Correspondence address below	
Name	Chernoff Vilhauer McClung & Stenzel, L.L.P.		
Address	1600 ODS Tower, 601 SW Second Avenue		
City	Portland	State	OR
Country	USA	Telephone	503.227.5631
		Zip Code	97204-3157
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Name (print/ type)	Charles D. McClung	Registration No. (Attorney/Agent)	26,568
Signature		Date	August 1, 2003

08/01/03

1636 U.S. PRO

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Complete if Known

Application Number
Filing Date August 1, 2003
First Named Inventor Freeland, Robert C.
Examiner Name

☒ Applicant claims small entity status. See 37CFR 1.27

Art Unit

TOTAL AMOUNT OF PAYMENT \$415

Attorney Docket No. CDM/3772.9999

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number

03-1550

Deposit Account Name

Chernoff Vilhauer McClung & Stenzel

The Commissioner is authorized to: (check all that apply)

☐ Charge fees indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Code (\$)	Code (\$)		
1001 750	2001 375	Utility filing fee	375
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			\$375

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
19 - 20	**= 0	x 18 =	0
Indep. Claims 2 - 3	**= 0	x 84 =	0
Multiple Dependent			

Large Entity	Small Entity	Fee Description	Fee Code (\$)	Fee Code (\$)
		Claims in excess of 20	1202 18	2202 9
		Independent claims in excess of 3	1201 84	2201 42
		Multiple dependent claim, if not paid	1203 280	2203 140
		**Reissue independent claims over original patent	1204 84	2204 42
		*Reissue claims in excess of 20 and over original patent	1205 18	2205 9
SUBTOTAL (2)				\$0

**or number of previously paid, if greater. For reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge-late provisional filing fee or cover sheet	
1053 130	1053 130			Non-English specification	
1812 2,520	1812 2,520			For filing a request for ex-parte reexamination	
1804 920*	1804 920*			Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 410	2252 205			Extension for reply within second month	
1253 930	2253 465			Extension for reply within third month	
1254 1,450	2254 725			Extension for reply within fourth month	
1255 1,970	2255 985			Extension for reply within fifth month	
1401 320	2401 160			Notice of Appeal	
1402 320	2402 160			Filing a brief in support of an appeal	
1403 280	2403 140			Request for oral hearing	
1451 1,510	1451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,300	2453 650			Petition to revive - unintentional	
1501 1,300	2501 650			Utility issue fee (or reissue)	
1502 470	2502 235			Design issue fee	
1503 630	2503 315			Plant issue fee	
1460 130	1460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180			Submission of Information Disclosure Stmt.	
8021 40	8021 40			Recording each patent assignment per property	40
				(times no. of properties) - total assignments 1	
1809 750	2809 375			Filing a submission after final rejection (37 C.F.R. 1.129(a))	
1810 750	2810 375			For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375			Request for Continued Examination (RCE)	
1802 900	1802 900			Request for expedited examination of a design application	
Other fee (specify)					
* Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					\$40

SUBMITTED BY

Complete (if applicable)

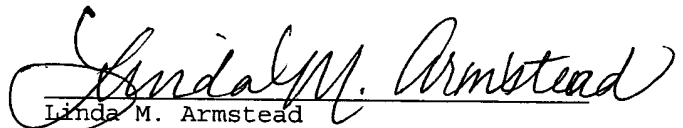
Name (print type) Charles D. McClung Registration No. 26,568 Telephone (503) 227-5631
Signature  Date August 1, 2003

CERTIFICATE OF MAILING

BY "EXPRESS MAIL"

Express Mail No.: EL915424748US
Date of Deposit: August 1, 2003
Title: STACKABLE WIRE FRAME STORAGE BIN
Applicant: Freeland, Robert C.

I hereby certify that a Utility Patent Application, including Specification (9 pages), with: (1) Fee Transmittal (in duplicate); (2) Utility Patent Application Transmittal; (3) Declaration; (4) Power of Attorney; (5) Assignment, together with Recordal Cover Sheet; (6) Statement of Status as Small Entity in Accordance With 37 CFR S1.27; (7) 2 sheets of drawings (FIGs. 1-4), (8) Certificate Under 37 CFR §3.73(b); (9) Information Disclosure Statement pursuant to 37 CFR §1.56 together with Form PTO-1449, including citations; (10) check in the sum of \$415 for the filing and recordation fees; and (11) acknowledgment postcard, are being deposited with the United States Postal Service "Express Mail to Addressee" on the date indicated above and is addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Linda M. Armstead